

Performance Planning and Feedback Form – Self Evaluation –

In order to assist you in completing your self evaluation and developing your career plan, I would like you to take this opportunity to complete this document. To assist you in organizing your thoughts, please consider the following:

- Be honest with yourself
- Do not compare yourself to others, concentrate on your desires and needs
- Take time to reflect

Associate Name: _____

Date: _____

Job Title: _____

Supervisor Name: _____

Please indicate your specific comments or examples of your abilities as they pertain to your position in the following areas.	Developing	Quality	Outstanding
Your technical focus? Example(s):			
Accountability for your actions? Example(s):			

LBCC Customer Service Behaviors:	Developing	Quality	Outstanding
<p>EXCELLENCE--setting and achieving the highest standards. (Holds self to the highest standards of professionalism while demonstrating utmost respect for all.) Example(s):</p>			
<p>COMPASSION—caring with sensitivity and respect. (Values your own personal trustworthiness and is committed to treating every customer with care, respect and sensitivity.) Example(s):</p>			
<p>INNOVATION—advancing care through new ideas and technology. (Unique talents and experiences brought to your role at LBCC and thinks outside the boundaries in order to optimize the customer experience.) Example(s):</p>			
<p>COLLABORATION—works together to achieve our mission. (All interactions are conducted with respect, professionalism and encouragement and works as a team member to provide positive patient, family, and internal Associate experiences.) Example(s):</p>			
<p>SERVICE—understands and exceeds customer expectations. (Strives to delight customers by anticipating each person's needs and seeks the information necessary to provide timely, accurate service in a setting conducive to accomplishing the customer's goals.) Example(s):</p>			

What would you say your key strengths and accomplishments have been over this past year (i.e., technical skills, activities you have engaged in, etc.)?

What areas would you like to focus for improvement on over the next year? What areas would you like to focus on to achieve your professional growth? (i.e. education, certification, etc.)

How can LBCC assist you in achieving your goals? (i.e. skill sets not part of your job but would like to learn/to use, education, certification, etc.)?

What do you consider to be key factors contributing to your overall job satisfaction?

Other Comments:

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Director/Manager's commitment and action plan:

Associate Signature: _____

Date: _____

Director/Manager Signature: _____

Date: _____